



Iowa Department of Human Services

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INFORMATIONAL LETTER NO.1540

DATE: August 26, 2015

TO: All Iowa Medicaid Providers (Excluding Individual Consumer Directed Attendant Care, Waiver and Dental)

FROM: Iowa Department of Human Services (DHS), Iowa Medicaid Enterprise (IME)

RE: Payment for Botox

EFFECTIVE: October 1, 2015

ICD-10 implementation will change the IME payment for Botox on claims with dates of service or discharge dates on and after October 1, 2015. Botox (botulinum toxin Type A) is a brand name for a product initially developed and marketed for cosmetic use. The utilization of this product is generally monitored closely due to cost as well as tendency for cosmetic purposes.

Previously, the IME allowed payment for the Botox procedure (J0585) only when billed with a diagnosis of infantile cerebral palsy. However, the approved ICD-10-CM diagnosis code list for Botox payment has been expanded beyond infantile cerebral palsy.

ICD-10 diagnosis codes that the IME will allow payment for Botox include the following:

- Cerebral Palsy
- Spastic Monoplegia, Hemiplegia, Paraplegia, or Quadriplegia
- Blepharospasm
- Strabismus
- Exotropia
- Spasticity related to Stroke

If you have any questions please contact the IME Provider Services Unit at 1-800-338-7909 or email at ICD-10project@dhs.state.ia.us.